08/21/2011 18:46

Image# 11932299853

FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

_		For Oth	er Than An	Authorize	ed Commi	ttee		Office Use	Only	
1.	NAME OF COMMITTEE (in full)		MAILING LAI OR PRINT		xample:If typir ver the lines	ng, type				
L	American Health Care Assoc	iation Polit	ical Action Con	nmittee						
								1 1 1 1		
AD	DRESS (number and street)	1201 L	Street, NW							
	Check if different									
L	than previously reported. (ACC)	Washi	ngton				DC	20	005	
2.	FEC IDENTIFICATION NUM	IBER 1	_	CITY 🛋		:	STATE	Z	IPCODE .	A
	C00006080			3. IS THIS REPOR	Т	NEW (N) OR		AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	Ì΄β	Monthly Report	Feb 20 (M	2)	May 20 (M5)	X Au	ug 20 (M8)	Yea	v 20 (M11) on-Election ar Only)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)	Se	ep 20 (M9)	(No Yea	c 20 (M12) on-Election ar Only)
	April 15			Apr 20 (M	1)	Jul 20 (M7)	0	ct 20 (M10)	Jar	1 31 (YE)
	Quarterly Report(Q	1) (c) 12-Day		Primary (12	2P)	Genera	al (12G)	Rui	noff (12R)
	July 15 Quarterly Report(Q	2)	PRE-Election Report for t		Convention	-	Specia			, ,
	October 15 Quarterly Report(Q	3)	rioportion		Convontion	.(120)		. (123)		
	January 31 Quarterly Report(Y	E)		Election on					in the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)) 30-Day Post -Elec Report for t		General (3)	0G)	Runoff	(30R)	Spe	ecial (30S)
	Termination Report (TER)			Election on			• • •		in the State of	
5.	Covering Period 0 7	0	1 201	1	through	07	3 1	2011		
	ertify that I have examined this I		to the best of reconard Russ	ny knowledge	e and belief it	is true, correct	and complet	е.		
Тур	oe or Print Name of Treasurer	IVII. L	eonard Huss							
Sig	nature of Treasurer Electron	nically Filed	d by Mr. Leo	nard Russ		[Pate 0	8 20	20	1 1
NC	TE : Submission of false, error	neous, or ir	ncomplete infor	mation may s	subject the pe	rson signing thi	s Report to t	he penalties o	of 2 U.S.C 4	137g.
	Office Use								FORM 3	X

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISRURSEMENTS

OF RECEIPTS AND DISBURSEMENTS Page 2

Write or Type Committee Name
American Health Care Association Political Action Committee

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2011		110057.22
	(b) Cash on Hand at Begining of Reporting Period	239251.33	
	(c) Total Receipts (from Line 19)	99675.76	648869.87
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	338927.09	758927.09
7 .	Total Disbursements (from Line 31)	131000.00	551000.00
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	207927.09	207927.09
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

American Health Care Association Political Action Committee

м м 0 7 0 1 м м 0 7 3 1 2011 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 87152.77 576033.84 (i) Itemized (use Schedule A) 7522.99 51836.03 (ii) Unitemized (iii) TOTAL (add 94675.76 627869.87 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 5000.00 21000.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 648869.87 99675.76 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 99675.76 648869.87 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 99675.76 648869.87 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures:
(a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... **Total Operating Expenditures** 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))........... 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 131000.00 551000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 131000.00 551000.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 131000.00 551000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
33.	Total Contributions (other than loans) from Line 11(d), page 3)	99675.76	648869.87	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	99675.76	648869.87	
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association I	the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Steve Ackerson Mailing Address 6750 Westown Pkw City West Des Moines FEC ID number of contributing federal political committee. Name of Employer lowa Health Care Assn. Receipt For: Primary General Other (specify)	State Zip Code IA 50266-7716 C Occupation Executive Director Aggregate Year-to-Date 1200.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 2 0 1 1 Transaction ID: C1324266 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Charlie Anderson Mailing Address 8230 Lenox Creeksi City Antioch FEC ID number of contributing federal political committee. Name of Employer Tennessee Health Management Receipt For: Primary General Other (specify)	de Dr State Zip Code TN 37013 C Occupation Vice President of Operations Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7
Full Name (Last, First, Middle Initial) Robert Asztalos Mailing Address 5013 Centennial Oa City Tallahassee FEC ID number of contributing federal political committee. Name of Employer Asztalos & Associates Receipt For: Primary General Other (specify)	k Circle State Zip Code FL 32308 C Occupation President Aggregate Year-to-Date 362.50	Date of Receipt M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	475.00

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) American Health Care Associatio	and Statements may not be sold or used by any persong the name and address of any political committee to n Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mark Ballif Mailing Address 100 E San Marco Suite 200		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1326559
San Marcos FEC ID number of contributing federal political committee.	CA 92069	Amount of Each Receipt this Period 1250.00
Name of Employer Plum Healthcare Group Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Partner Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Harry Baum Mailing Address 8300 NW Eastsid	le Drive	Date of Receipt M M D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1320323
Weatherby Lake	MO 64152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sharon Lake Nursing Home	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Brad Bedell		Date of Receipt
Mailing Address 731 North Main		07 08 7 2011
City	State Zip Code	Transaction ID: C1320324
Sikeston FEC ID number of contributing federal political committee.	MO 63801-1210	Amount of Each Receipt this Period 1250.00
Name of Employer Health Facilities Managem- ent	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUBTOTAL of Receipts This Page (optic	nal)	2750.00

	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a
or for	commercial purposes, other than using the AME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	merican Health Care Association Po	iltical Action	Committee	
. <u>E</u>	ull Name (Last, First, Middle Initial) Iton Beebe, Jr.			Date of Receipt
M	ailing Address 1308 Bruton Springs F	Road		07 11 2011
	ity	State	Zip Code	Transaction ID: C1323305
_	ustin	TX	78733	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		1250.00
	ame of Employer ouisiana Extended Care enters	Occupatio Owner	n	
	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	3750.00	
	ull Name (Last, First, Middle Initial) yn Bentley			Date of Receipt
M	ailing Address 2212 Hidden Valley Lr	07 11 2011		
C	ity	State	Zip Code	Transaction ID: C1321245
<u>s</u>	ilver Spring	MD	20904-5240	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		20.00
Α	ame of Employer merican Health Care Asso- ation	Occupatio Director,	n Regulatory	
	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	ull Name (Last, First, Middle Initial) yn Bentley			Date of Receipt
M	ailing Address 2212 Hidden Valley Lr	1		07 22 2011
	ity	State	Zip Code	Transaction ID: C1327104
<u>S</u>	ilver Spring	MD	20904-5240	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		20.00
<u>c</u> i	ame of Employer merican Health Care Asso- ation	Occupatio Director,	n Regulatory	
	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUE	BTOTAL of Receipts This Page (optional)	1		1290.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Health Care Association F	Political Action Committee	
Full Name (Last, First, Middle Initial) William Biggs Mailing Address 101 Grace Street City Easley FEC ID number of contributing federal political committee. Name of Employer Health Management Resourc-	State Zip Code SC 29640 C Occupation Executive Director	Date of Receipt O 7
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Orlando Bisbano, Jr. Mailing Address 14 Donna Court		Date of Receipt 0 7
City	State Zip Code	Transaction ID: C1331517
Bristol FEC ID number of contributing federal political committee.	RI 02809	Amount of Each Receipt this Period 562.50
Name of Employer Orchard View Manor and Re-	Occupation Administrator	
hab Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 937.50	
Full Name (Last, First, Middle Initial) Linda Black-Kurek	-	Date of Receipt
Mailing Address 7445 Liberty Woods	Lane	0 7 1 4 2 0 1 1
City	State Zip Code OH 45459-3911	Transaction ID: C1323294
Dayton FEC ID number of contributing federal political committee.	OH 45459-3911	Amount of Each Receipt this Period 1250.00
Name of Employer LBK Healthcare, Inc.	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUBTOTAL of Receipts This Page (optional)		4312.50
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association	nd Statements may not be sold or used by any pers the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	T Gilliotal 7 Iolioti Goliminaco	
Full Name (Last, First, Middle Initial) Steve Boymel		Date of Receipt
Mailing Address 12100 Reed Hartm	an Highway	07 08 2011
City	State Zip Code	Transaction ID: C1321361
Cincinnati	OH 45241-6036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Brookwood Retirement Comm-	Occupation	
unity Receipt For:	Owner/Administrator	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) John D Brammeier	I	Date of Receipt
Mailing Address 32 Desert Willow L	ane	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1323563
<u>Littleton</u>	CO 80127	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Pinon Management	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Stuart Brown	I	Date of Receipt
Mailing Address 909 S 336th St Ste 200		07 08 YYYY 2011
City	State Zip Code	Transaction ID: C1320408
Federal Way	WA 98003-7394	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	333.33
Name of Employer Village Concepts Inc.	Occupation COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.66	
CURTOTAL of Descripts This Page (autism)		1033.33

SCHEDULE A (F	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 59 (check only one) X
or for commercial purpose NAME OF COMMITTE	s, other than using the name an	d address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Christopher R. Bryson Mailing Address 162	Middle Initial)		Date of Receipt 0 7 0 8 2 0 1 1
City Norcross	Stat GA		Transaction ID: C1320349 Amount of Each Receipt this Period
FEC ID number of cor federal political commi	tee.	pation	250.00
Name of Employer UHS-Pruitt Corporatio Inc. Receipt For: Primary Other (specify)	General Aggr	f Operating Officer egate Year-to-Date ▼ 750.00	
Full Name (Last, First, Douglas Burr Mailing Address 118	Middle Initial) 5 Wilde Run Court		Date of Receipt 0 7 0 8 2 0 1 1
City	Stat	te Zip Code	Transaction ID: C1320330
Roswell FEC ID number of cor federal political commi		30075	Amount of Each Receipt this Period 275.00
Name of Employer Cypress Administrative rvices, LLC Receipt For:	VP F	pation Finance egate Year-to-Date ▼	
Primary Other (specify)	General	1612.00]
Full Name (Last, First, Douglas Burr			Date of Receipt
Mailing Address 118	5 Wilde Run Court		07 26 2011
City	Star GA	·	Transaction ID: C1327207
Roswell FEC ID number of cor federal political commi	tributing	30075	Amount of Each Receipt this Period 787.00
Name of Employer Cypress Administrative rvices, LLC	VP F	pation Finance	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 1612.00	
SUBTOTAL of Receipts	This Page (optional)		1312.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/59 (check only one) X 11a 11b 11c 12
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American Health Care Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Teresa Cagnolatti		Date of Receipt
Mailing Address 2201 Wilson Blvd Apt 620	7.01	07 08 2011
City Arlington	State Zip Code VA 22201-3384	Transaction ID: C1320374 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer AHCA	Occupation Director, Govt Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Douglas Cecil		Date of Receipt
Mailing Address PO Box 3347		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1326811
Spartanburg	SC 29304-3347	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer White Oak Manor	Occupation Dir Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Donald Chensvold		Date of Receipt
Mailing Address 2126 Blue Heron D	r.	07 21 YYYY 2011
City	State Zip Code	Transaction ID: C1325495
Springville	IA 52336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Healthcare of Iowa, Inc.	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional	, ,	1350.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 59 (check only one) X 11a
Any information copied from such Reports or for commercial purposes, other than use NAME OF COMMITTEE (In Full) American Health Care Association	and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	on to made your or	Data of Passist
Mailing Address 8624 Mississippi	Blvd NW	Date of Receipt 0 7 2 2 2 2 1 1
City Coon Rapids	State Zip Code MN 55433-5968	Transaction ID: C1326560 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	334.00
Name of Employer Benedictine Health System- Cambridge Receipt For: Primary General Other (specify) ▼	Occupation VP, Long Term Care Services Aggregate Year-to-Date ▼ 667.34	
Full Name (Last, First, Middle Initial) Kathleen Collins Pagels Mailing Address 1440 East Misson	uri Street	Date of Receipt
City Phoenix FEC ID number of contributing federal political committee.	State Zip Code AZ 85014	Transaction ID: C1320332 Amount of Each Receipt this Period 125.00
Name of Employer Arizona Health Care Association Receipt For: Primary General Other (specify)	Occupation Executive Director Aggregate Year-to-Date 375.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 3300 Englewood	Avenue	07 27 2011
City Yakima	State Zip Code WA 98902	Transaction ID: C1327101 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Ponderosa Assisted Living Community Receipt For:	Occupation Administrator	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	onal)	809.00

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Ar	for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Health Care Association Po	litical Action Committee	
۱.	Full Name (Last, First, Middle Initial) Paul Diaz Mailing Address - COO C 445 Ct		Date of Receipt
	Mailing Address 680 S 4th St City	State Zip Code	0 7 2 1 2 0 1 1 Transaction ID: C1326800
	Louisville	KY 40202-2407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00
	Name of Employer Kindred HealthCare	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
	Full Name (Last, First, Middle Initial) Judith Dicker	Date of Receipt	
	Mailing Address 18215 Hillside Avenue	07 14 7 2011	
	City	State Zip Code	Transaction ID: C1323297
	<u>Jamaica</u>	NY 11432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1250.00
	Name of Employer Hillside Manor	Occupation Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) Anthony Durante		Date of Receipt
	Mailing Address 26 North Broadway		07 29 7 2011
	City	State Zip Code	Transaction ID: C1331516
	Schenectady	NY 12305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	625.00
	Name of Employer DMN Management Services	Occupation Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
S	UBTOTAL of Receipts This Page (optional)		6875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Health Care Association Po	olitical Action Committee	
Full Name (Last, First, Middle Initial) A. Gregory J. Elliot Mailing Address 240 Capitol Street		Date of Receipt
Mailing Address 240 Capitol Street City	State Zip Code	0 7 2 0 7 2 0 1 1 Transaction ID: C1325431
Charleston	WV 25301-2297	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.66
Name of Employer AMFM, Inc.	Occupation IT Coordinator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2916.70	
Full Name (Last, First, Middle Initial) Darlene Evans Mailing Address 28035 Elm Grove		Date of Receipt
Mailing Address 20033 EIIII Grove		07 21 2011
City	State Zip Code	Transaction ID: C1326806
San Antonio	TX 78261-2001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Autumn Winds Retirement	Occupation Owner/ Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Teresa Eyet		Date of Receipt
Mailing Address 10009 Dallas Ave		07 11 7 2011
City	State Zip Code	Transaction ID: C1321246
Takoma Park FEC ID number of contributing	MD 20901-2240	Amount of Each Receipt this Period 20.00
federal political committee.	Occupation	
Name of Employer American Health Care Asso- ciation	Director, Education	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		686.66
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	686.66

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 59 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association I	the name and add	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Teresa Eyet Mailing Address 10009 Dallas Ave			Date of Receipt
City Takoma Park FEC ID number of contributing	State MD	Zip Code 20901-2240	0 7 2 2 2 0 1 1 Transaction ID: C1327105 Amount of Each Receipt this Period 20.00
Name of Employer American Health Care Association Receipt For: Primary Other (specify)	Occupation Director,	n Education Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Donald Franco Mailing Address 5 O'Kill Drive			Date of Receipt 0 7 0 8 2 0 1 1
City	State	Zip Code	Transaction ID: C1320387
East Haven FEC ID number of contributing federal political committee.	C	06513	Amount of Each Receipt this Period 250.00
Name of Employer Paragon Group Inc.	Occupation SNF Adn	n ninstrator/Owner/President	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Kit E. Gamble			Date of Receipt
Mailing Address PO Box 52389			07 11 2011
City	State	Zip Code	Transaction ID: C1323303
Shreveport FEC ID number of contributing federal political committee.	C	71135-2389	Amount of Each Receipt this Period 1500.00
Name of Employer Gamble Guest Care Corpora- tion	Occupation Presiden	t	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3500.00	
SUBTOTAL of Receipts This Page (optional)		1770.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association	d Statements may not be sold or used by any perso the name and address of any political committee to Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Gomez Mailing Address 2201 K Street City Sacramento FEC ID number of contributing federal political committee. Name of Employer CA Association of Health Facilities Receipt For: Primary General Other (specify)	State Zip Code CA 95816-4922 C Occupation President Aggregate Year-to-Date 750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Don Gormly Mailing Address 17011 Beach Blvd Ste 1130 City Huntington Beach FEC ID number of contributing federal political committee. Name of Employer Anberry Rehab Hosp Receipt For: Primary General Other (specify)	State Zip Code CA 92647-7402 C Occupation Owner Aggregate Year-to-Date 3750.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 0 8 2 0 1 1 Transaction ID: C1320404 Amount of Each Receipt this Period 1250.00
Full Name (Last, First, Middle Initial) Alan Graham Mailing Address 182 West Edge Driv City Huntsville FEC ID number of contributing federal political committee. Name of Employer Nexion Health Corporation Receipt For: Primary General Other (specify)	State Zip Code TX 77340 C Occupation Administrator Aggregate Year-to-Date 500.00	Date of Receipt M M M O O O O O O O O O O O O O O O O
SUBTOTAL of Receipts This Page (optional	l) >	2000.00

A.

В.

C.

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 18 / 59
	Use separate schedule(s) for each category of the	(check only one)
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
	Botanea Gammary 1 age	13 14 15 16 17
Any information copied from such Reports and S	statements may not be sold or used by any persor	n for the purpose of soliciting contributions
or for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Health Care Association Pol	litical Action Committee	
Full Name (Last, First, Middle Initial) Pamela Griffin		Date of Receipt
Mailing Address 1120 Walnut St		07 08 YYYY 2011
City	State Zip Code	Transaction ID: C1320426
North Bend	NE 68649-5012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	334.00
Name of Employer Celebrate LIFE, Inc.	Occupation President	1
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	Aggregate real-to-bate v	
Other (specify)	668.00	
Full Name (Last, First, Middle Initial) Will Griffin		Date of Receipt
Mailing Address 430 Will Rogers Parkw	vay	M M / D D / Y Y Y Y
-		07 01 2011
City	State Zip Code	Transaction ID: C1318572
Oklahoma City	OK 73108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1575.00
Name of Employer	Occupation	
Grace Living Cénters	coo	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1575.00	
Full Name (Last, First, Middle Initial)		Data of Pagaint
Howard Groff Mailing Address 11337 Louisiana Circle		Date of Receipt
	7	07 08 2011
City	State Zip Code	Transaction ID: C1320347
Bloomington	MN 55438	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Tealwood Care Centers Inc	Occupation President	1
Receipt For:	Aggregate Year-to-Date ▼]
Primary General	2750.00	
Other (specify) ▼	3750.00	
		2150.00
SUBTOTAL of Receipts This Page (optional)	·····	3159.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association F	d Statements may not be sold or used by any personant the name and address of any political committee to Political Action Committee	
Full Name (Last, First, Middle Initial) Reita Hall Mailing Address PO Box 3667 City Tupelo FEC ID number of contributing federal political committee. Name of Employer Community Eldercare Services Receipt For:	State Zip Code MS 38803 C Occupation VP, Clinical Services Aggregate Year-to-Date ▼	Date of Receipt M M O O O O O O O O O O O O O O O O O
Primary General Other (specify) Full Name (Last, First, Middle Initial) Gerald Hamilton Mailing Address 7612 Rio Penasco C City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Albuquerque FEC ID number of contributing federal political committee. Name of Employer R&G Healthcare Management Receipt For: Primary General Other (specify)	Occupation Owner/Administrator Aggregate Year-to-Date 750.00	Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Gil Harrington Mailing Address PO Box 699 City Eastman FEC ID number of contributing federal political committee. Name of Employer Pine Care Services Receipt For: Primary General Other (specify)	State Zip Code GA 31023-0699 C Occupation President Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	1470.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association	nd Statements may not be sold or used by any personal the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Susan Hebert Mailing Address 280 High Street City	State Zip Code	Date of Receipt 0 7 2 1 2 0 1 1 Transaction ID: C1325436
Westerly FEC ID number of contributing federal political committee.	RI 02891	Amount of Each Receipt this Period 350.00
Name of Employer Westerly Health Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Richard Herrick Mailing Address 33 Elk Street 300		Date of Receipt 0 7 0 6 2 0 1 1
City Albany FEC ID number of contributing federal political committee.	State Zip Code NY 12207	Transaction ID: C1319902 Amount of Each Receipt this Period 3150.00
Name of Employer NYS Health Facilities Association Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date 3900.00	
Full Name (Last, First, Middle Initial) Richard Herrick Mailing Address 33 Elk Street		Date of Receipt
City Albany	State Zip Code NY 12207	Transaction ID: C1320376 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer NYS Health Facilities Ass- ociation Receipt For:	Occupation President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3900.00	
SUBTOTAL of Receipts This Page (optional	l)	3750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association Po	Statements may not be sold or used by any person ename and address of any political committee to slitical Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robin L. Hillier Mailing Address 22 Parrish Road City Conneaut FEC ID number of contributing federal political committee. Name of Employer RLH Consulting Receipt For:	State Zip Code OH 44030 C Occupation Owner Aggregate Year-to-Date	Date of Receipt M M O 7
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Brian Holloway Mailing Address 1001 Center Street	3750.00	Date of Receipt
City Little Egg Harbor FEC ID number of contributing federal political committee. Name of Employer Seacrest Village Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 08087-1364 C Occupation Owner/President Aggregate Year-to-Date	Transaction ID: C1320372 Amount of Each Receipt this Period 450.00
Full Name (Last, First, Middle Initial) Jerry Holloway Mailing Address 17011 Beach Blvd Ste 1130 City Huntington Beach FEC ID number of contributing federal political committee. Name of Employer Anberry Rehabilitation Hospital Receipt For: Primary General Other (specify)	State Zip Code CA 92647-7402 C Occupation Partner Aggregate Year-to-Date 3750.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		2950.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Health Care Association	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jeffrey N Hyatt		Date of Receipt
Mailing Address 701 N. 39th Avenu City Selah	State Zip Code WA 98902	Transaction ID: C1320351 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hyatt Family Facilities Receipt For: Primary General Other (specify) ▼	Occupation SNF AL Owner Operator Aggregate Year-to-Date 750.00	
Full Name (Last, First, Middle Initial) Treensha Johnson Mailing Address 1302 Nottingham	St	Date of Receipt M
City	State Zip Code	Transaction ID: C1320219
<u>Huntsville</u>	TX 77340-5622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nexion Health	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Richard Kase	•	Date of Receipt
Mailing Address 5125 Pine Rocklar	nds Avenue	07 08 2011
City	State Zip Code	Transaction ID: C1320352
Lithia FEC ID number of contributing federal political committee.	FL 33547	Amount of Each Receipt this Period 250.00
Name of Employer Cypress Healthcare	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3825.00	
SUBTOTAL of Receipts This Page (option	al)	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the	FOR LINE NUMBER: PAGE 23 / 59 (check only one) X 11a 11b 11c 12
		ed Summary Page	13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be so the name and address of ar	old or used by any persony political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Association F			
Full Name (Last, First, Middle Initial) Richard Kase			Date of Receipt
Mailing Address 5125 Pine Rockland	s Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip C	Code	Transaction ID: C1327205
<u>Lithia</u>	FL 3354	17	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1575.00
Name of Employer Cypress Healthcare	Occupation President		
Receipt For:	Aggregate Year-to-D	Date V	
Primary General Other (specify) ▼		3825.00	
Full Name (Last, First, Middle Initial) Richard Kase			Date of Receipt
Mailing Address 5125 Pine Rockland			07 26 7 2011
City	State Zip C		Transaction ID: C1327208
<u>Lithia</u>	FL 3354	1 7	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1500.00
Name of Employer Cypress Healthcare	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	Pate ▼ 3825.00	
Full Name (Last, First, Middle Initial) Bruce Kelly			Date of Receipt
Mailing Address 323 Highland			07 22 7 2011
City	State Zip C		Transaction ID: C1327103
Natchez	MS 3912	20	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Senior Living Centers	Occupation Owner		
Receipt For:	Aggregate Year-to-D	Date V	
Primary General Other (specify) ▼		1875.00	

SCHEDULE A (FEC FOI ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one) X 11a
Any information copied from such Re or for commercial purposes, other the	ports and Statements may not be sold or used by any perso an using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Asso	ciation Political Action Committee	
Full Name (Last, First, Middle Init Terri Kern	al)	Date of Receipt
Mailing Address PO Box 114)	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sandia Park	State Zip Code NM 87047	Transaction ID: C1323712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1100.00
Name of Employer Sun Healthcare Group, Inc.	Occupation SVP Corporate Communications	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Init Rosemary C. Kilby	al)	Date of Receipt
Mailing Address 2030 N Gare	ey Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pomona	State Zip Code CA 91767-2722	Transaction ID: C1320388
FEC ID number of contributing federal political committee.	C 91/0/-2/22	Amount of Each Receipt this Period 66.67
Name of Employer Landmark Medical Center	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.01	
Full Name (Last, First, Middle Init Steve Kuranz	al)	Date of Receipt
Mailing Address 1400 8th Av	9	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1321032
Union Grove FEC ID number of contributing federal political committee.	WI 53182-1063	Amount of Each Receipt this Period 500.00
Name of Employer Hope Health & Rehabilitat- ion	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Possible This Poss	(optional)	1666.67

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Repor or for commercial purposes, other than u	ts and Statements may not be sold or used by any person using the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Health Care Associat	tion Political Action Committee	
Full Name (Last, First, Middle Initial) Mary Jo Kurtz		Date of Receipt
Mailing Address 304 South Van	Dien Avenue	07 21 2011
City	State Zip Code	Transaction ID: C1325439
Ridgewood	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Van Dyk Health Care	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Mary Jo Kurtz		Date of Receipt
Mailing Address 304 South Van	Dien Avenue	07 28 2011
City	State Zip Code	Transaction ID: C1332188
Ridgewood	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Van Dyk Health Care	Occupation Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) David Kyllo		Date of Receipt
Mailing Address 4621 28th Road	d South	07 11 2011
City	State Zip Code	Transaction ID: C1321253
Arlington	VA 22206	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.56
Name of Employer National Center for Assis- ted Living	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 593.40	
SUBTOTAL of Receipts This Page (op	tional)	314.56

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements and address of any political committee	
American Health Care Association F	Political Action Committee	
Full Name (Last, First, Middle Initial) David Kyllo		Date of Receipt
Mailing Address 4621 28th Road Sou		07 22 2011
City Arlington	State Zip Code VA 22206	Transaction ID: C1327117 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.56
Name of Employer National Center for Assis-	Occupation Executive Director	
ted Living Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	593.40	
Full Name (Last, First, Middle Initial) Theodore Lee	1	Date of Receipt
Mailing Address 700 Hanover St		07 13 YYYY 2011
City	State Zip Code	Transaction ID: C1321348
Manchester	NH 03104-5309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Hanover Hill Health Care	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Brett Lessley		Date of Receipt
Mailing Address 920 East 16th Street		07 05 YYYY 2011
City	State Zip Code	Transaction ID: C1319907
Claremore	OK 74017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer Claremore Nursing Home	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
OUDTOTAL (D Ti. D ()		3039.56

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) American Health Care Association	s and Statements may not be sold or used by any persoing the name and address of any political committee to on Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Peter Lougee Mailing Address 25407 Pyrite		Date of Receipt
City Boerne	State Zip Code TX 78006	Transaction ID: C1320384 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	312.50
Name of Employer SavaSeniorCare Receipt For: Primary General Other (specify)	Division President Aggregate Year-to-Date ▼ 687.50	
Full Name (Last, First, Middle Initial) Todd Mackenzie Mailing Address 24 Canyon Creek	k Drive	Date of Receipt 0 7 0 8 2 0 1 1
City Wimberley FEC ID number of contributing federal political committee.	State Zip Code TX 78676	Transaction ID: C1320353 Amount of Each Receipt this Period 75.00
Name of Employer Remington Medical Resort of San Antoni Receipt For: Primary General Other (specify) ▼	Occupation Chief Executive Officer Aggregate Year-to-Date 225.00	
Full Name (Last, First, Middle Initial) R. Peter Madel, Jr. Mailing Address 108 8th St NW		Date of Receipt
City Waseca	State Zip Code MN 56093-1912	Transaction ID: C1323302 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer Lake Shore Inn Nursing Ho- me Receipt For: Primary General	Occupation CEO Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	825.00	
SUBTOTAL of Receipts This Page (option	onal)	662.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Association Pol	litical Action	Committee	
Full Name (Last, First, Middle Initial) Patrick Martone			Date of Receipt
Mailing Address 26 North Broadway			07 08 2011
City	State	Zip Code	Transaction ID: C1320412
Schenectady	NY	12305-1932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		625.00
Name of Employer Hallmark Nursing Centre	Occupatio		
Inc.		rator and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1875.00	
Full Name (Last, First, Middle Initial) Christian Mason	1		Date of Receipt
Mailing Address 15467 Union School R	load		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C1320378
Woodburn	OR	97071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Senior Housing Managemnet LLC	Occupation Presiden		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Debbie McLarty	1		Date of Receipt
Mailing Address 101 Sun Avenue NE			07 08 2011
City	State	Zip Code	Transaction ID: C1320354
Albuquerque	NM	87109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Sun Health Care Group, Inc	Occupation Senior V	n ice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUBTOTAL of Receipts This Page (optional)			875.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Health Care Association	and Statements may not be sold or used by any perso ig the name and address of any political committee to in Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael Meillier Mailing Address 27 Brand Ave City Faribault FEC ID number of contributing federal political committee. Name of Employer Pleasant Manor Inc	State Zip Code MN 55021-6411 C Occupation Social Services Dir	Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 1 1 2 0 1 1 Transaction ID: C1323307 Amount of Each Receipt this Period 82.50
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 247.50	
Full Name (Last, First, Middle Initial) Jill Mendlen Mailing Address 2151 Calle Poco City	State Zip Code	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
El Cajon FEC ID number of contributing federal political committee. Name of Employer Lightbridge Hospice	CA 92019-3540 C Occupation	Amount of Each Receipt this Period 500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Richard Miller Mailing Address 303 Cleveland Ave Ste 206 City	State Zip Code	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Tumwater FEC ID number of contributing federal political committee.	WA 98501-3340	Amount of Each Receipt this Period 250.00
Name of Employer Washington Health Care Association Receipt For: Primary General Other (specify) ▼	Occupation Executive Director Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (option	nal)	832.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any p the name and address of any political committe	erson for the purpose of soliciting contributions see to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Association I	Political Action Committee	
Full Name (Last, First, Middle Initial) V. Richard Miller		Date of Receipt
Mailing Address 2849 Spanish River		07 08 2011
City	State Zip Code	Transaction ID: C1320357
Boca Raton	FL 33432	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Retired	Occupation Retired	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Michael Morton		Date of Receipt
Mailing Address 415 Rogers Avenue		07 18 Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1325420
Fort Smith	AR 72901-1903	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Central Arkansas Nursing Centers	Occupation Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3750.00	
Full Name (Last, First, Middle Initial) Timothy F Nicholson		Date of Receipt
Mailing Address 15 Ocean Harbour (Dir	07 19 2011
City	State Zip Code	Transaction ID: C1323906
Ocean Ridge	FL 33435-6207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Lyric Health Care	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
)	3750.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 59 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Association	Political Action	Committee	
Full Name (Last, First, Middle Initial) Tony E Oglesby			Date of Receipt
Mailing Address PO Box 350			07 08 7 2011
City	State	Zip Code	Transaction ID: C1320359
Benton	TN	37307-0350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer SavaSenior Care	Occupation President		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		3750.00	
Full Name (Last, First, Middle Initial) Joe Okruhlica	· · ·		Date of Receipt
Mailing Address 1155 Eastern Pkwy			07 08 2011
City	State	Zip Code	Transaction ID: C1320386
Louisville	KY	40217-1401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Parkway Medical Center	Occupation Owner/A	n dministrator	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mark Parkinson			Date of Receipt
Mailing Address 8930 Harvest Square	re Ct		07 08 7 2011
City	State	Zip Code	Transaction ID: C1320381
Potomac	MD	20854-4475	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer American Healthcare Assoc- iation	Occupation President	n t and CEO	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	3750.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		2750.00

ITEMI	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 59 (check only one) X 11a
or for con	mation copied from such Reports and Sinmercial purposes, other than using the EOF COMMITTEE (In Full) rican Health Care Association Pol	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full N	ame (Last, First, Middle Initial)			Patra (Parada)
	Parkinson g Address 8930 Harvest Square C	Ct .		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Poto	mac	State MD	Zip Code 20854-4475	Transaction ID: C1320382 Amount of Each Receipt this Period
	D number of contributing all political committee.	C		1250.00
Name Self-E	of Employer imployed	Occupation Attorney	on	
	ot For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3750.00	
B. Rich F	ame (Last, First, Middle Initial) rell g Address 9705 Redamar Drive			Date of Receipt 0 7 0 8 2 0 1 1
City		State	Zip Code	Transaction ID: C1321359
FEC I	erstown D number of contributing Il political committee.	C	21740	Amount of Each Receipt this Period 367.00
Gene	of Employer sis Health Care	Occupation Senior V	n ice President	
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 734.00	
C. Russe	ame (Last, First, Middle Initial) II V Peterson g Address 5281 Ventura Dr			Date of Receipt 0 7 0 8 2 0 1 1
City		State	Zip Code	Transaction ID: C1320385
	ont D number of contributing Il political committee.	NE C	68025-9779	Amount of Each Receipt this Period 137.50
Name Nye S	of Employer enior Living	Occupation Regional	on I Vice President	
	ot For: Primary General Other (specify) ▼		e Year-to-Date ▼ 412.50	
SUBTO	FAL of Receipts This Page (optional)			1754.50
TOTAL	This Period (last page this line number	anly)	•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association Po	e name and addre	ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Debra Pizzulo Mailing Address 10281 NW 54 PL City Coral Springs FEC ID number of contributing federal political committee. Name of Employer Cypress Health Care Management Receipt For: Primary Other (specify)		Zip Code 33076 s. Receivable /ear-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mebane Pruitt Mailing Address 4275 NE Lakehaven I City Atlanta FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: Primary General Other (specify)	State GA C Occupation Homemake	Zip Code 30319 er rear-to-Date ▼ 3333.34	Date of Receipt M M M O 7 O 8 2 0 1 1 Transaction ID: C1320362 Amount of Each Receipt this Period 1666.67
Full Name (Last, First, Middle Initial) Neil L. Pruitt, Jr. Mailing Address 4275 Lakehaven Dr N City Atlanta FEC ID number of contributing federal political committee. Name of Employer UHS-Pruitt Corporation, Inc. Receipt For: Primary General Other (specify)	State GA C Occupation President 8	Zip Code 30319-1135 & CEO ′ear-to-Date ▼	Date of Receipt M M M O 7 O 8 2 0 1 1 Transaction ID: C1320361 Amount of Each Receipt this Period 1250.00
SUBTOTAL of Receipts This Page (optional) .			3041.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 34 / 59 (check only one) X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association P	he name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sally Rapp Mailing Address 3308 Ocean Bld # 280 City Corona Del Mar FEC ID number of contributing federal political committee. Name of Employer SR Management Svcs. Inc. Receipt For: Primary General Other (specify)	State Zip Code CA 92625 C Occupation CEO Aggregate Year-to-Date 3750.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Candace Read Mailing Address 600 East Whaley City Longview FEC ID number of contributing federal political committee. Name of Employer Stebbins Five Companies Receipt For: Primary General Other (specify)	State Zip Code TX 75601-6525 C Occupation Director of Business Development Aggregate Year-to-Date 350.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jon Reardon Mailing Address 1202 Weiss Street City Saginaw FEC ID number of contributing federal political committee. Name of Employer Hoyt Nursing & Rehab Centre Receipt For: Primary General Other (specify)	State Zip Code MI 48602-5471 C Occupation Owner Aggregate Year-to-Date 1100.00	Date of Receipt M M M / D D / Y Y Y Y Y O 7 1 4 2 0 1 1 Transaction ID: C1323714 Amount of Each Receipt this Period 550.00
SUBTOTAL of Receipts This Page (optional)	>	1950.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 59 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American Health Care Association	Political Action	Committee	
Full Name (Last, First, Middle Initial) Frank Romano			Date of Receipt
Mailing Address 61 Summer Street			07 08 2011
City	State	Zip Code	Transaction ID: C1320363
Rowley	MA	01969-1835	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Essex Group	Occupation CEO	n	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		3750.00	
Full Name (Last, First, Middle Initial) Leonard Russ			Date of Receipt
Mailing Address 40 Keogh Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C1320364
New Rochelle	NY	10805-1308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Bayberry Nursing Home	Occupation Owner/A	n dministrator	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) V. James Santarsiero			Date of Receipt
Mailing Address Executive Plaza 11 Suite 503	1		07 19 2011
City	State	Zip Code	Transaction ID: C1323706
Hunt Valley	MD	21021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		3750.00
Name of Employer Perenial Heathcare Manage- ment, Inc.	Occupation Managing	n g Member	
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼	0 0	5000.00	
SUBTOTAL of Receipts This Page (optional			6250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 59 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Health Care Association	d Statements may not be sold or used by any personant the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Philip Scalo Mailing Address 979 Lily Pond Lane City Franklin Lakes FEC ID number of contributing federal political committee. Name of Employer Bartley Healthcare Receipt For: Primary General		Date of Receipt M M M
Full Name (Last, First, Middle Initial) Jeff Schade Mailing Address 2532 West Cadillac PO Box 579 City Farwell FEC ID number of contributing		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer The Peplinski Group Inc. Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date 1000.00	
Full Name (Last, First, Middle Initial) Michael Scharfenberger Mailing Address 7265 Kenwood Roa # 300 City Cincinnati FEC ID number of contributing federal political committee.	State Zip Code OH 45236-4414	Date of Receipt M M M O D D O S 2 0 1 1 Transaction ID: C1321363 Amount of Each Receipt this Period 137.50
Name of Employer Nursing Care Management Receipt For: Primary General Other (specify) ▼	Occupation Exec Vice President Aggregate Year-to-Date 512.50	
SUBTOTAL of Receipts This Page (optional	l)	1962.50

SCHEDULE A (FEC Form 3X)

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16				
or fo	information copied from such Reports and Sor commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association Po	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.				
A	Full Name (Last, First, Middle Initial) Jerry Schroer, Jr. Mailing Address 1608 Muirfield NW City Canton FEC ID number of contributing ederal political committee. Name of Employer Altercare	State OH C Occupation Executiv		Date of Receipt M M M				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3500.00]				
3. <u>9</u>	Full Name (Last, First, Middle Initial) Shawn Scott Mailing Address 8106 Boulder Ct. City	State	Zip Code	Date of Receipt 0 7 0 8 2 0 1 1				
<u> </u> F f	Long Grove FEC ID number of contributing ederal political committee.	C	60047	Transaction ID: C1320366 Amount of Each Receipt this Period 250.00				
-	Name of Employer Medline Industries Receipt For: Primary General Other (specify)		Ithcare Corporate e Year-to-Date 750.00	_]				
; <u> </u>	Full Name (Last, First, Middle Initial) Louis Serra Mailing Address 2525 Pennsylvania Av	/e		Date of Receipt				
<u>'</u>	City Weirton FEC ID number of contributing ederal political committee.	State WV	Zip Code 26062-3634	Transaction ID: C1321364 Amount of Each Receipt this Period 550.00				
_	Name of Employer Weirton Geriatric Center	Occupatio	on .dministrator					
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1650.00					
su	BTOTAL of Receipts This Page (optional)		······	1700.00				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Association P	olitical Action Committee	
Full Name (Last, First, Middle Initial) Michael Shepard		Date of Receipt
Mailing Address PO Box 125 City	State Zip Code	M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mena	AR 71953	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Shepard Group	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Robert Siebel		Date of Receipt
Mailing Address 13185 W Great Mour	ntain Drive	07 08 7 2011
City	State Zip Code	Transaction ID: C1320367
Lakewood	CO 80228-3512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Carriage Healthcare Compa- nies, Inc.	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) Matthew D. Smyth		Date of Receipt
Mailing Address 2405 I St NW		07 111 YYYY 2011
City	State Zip Code	Transaction ID: C1321259
Washington FEC ID number of contributing federal political committee.	DC 20037-2206	Amount of Each Receipt this Period 19.24
Name of Employer American Health Care Asso-	Occupation Director of Grassroots	
<u>ciation</u> Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	288.60	
CURTOTAL of Possists This Poss (cations)		2519.24
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 59 (check only one) X 11a 11b 11c 12
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
American Health Care Association	Political Action Committee	
Full Name (Last, First, Middle Initial) Matthew D. Smyth Mailing Address 2405 St NW		Date of Receipt 0 7 2 2 2 2 0 1 1
City Washington	State Zip Code DC 20037-2206	Transaction ID: C1327174 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.24
Name of Employer American Health Care Association Receipt For: Primary General Other (specify) ▼	Occupation Director of Grassroots Aggregate Year-to-Date 288.60	
Full Name (Last, First, Middle Initial) J. Craig Souza Mailing Address 5109 Bur Oak Cir	•	Date of Receipt 0 7 2 8 2 0 1 1
City	State Zip Code	Transaction ID: C1332189
Raleigh	NC 27612-3101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1100.00
Name of Employer North Carolina Health Care Facilities	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) David Stallard	•	Date of Receipt
Mailing Address 1305 West Causew #212 City	yay Approach State Zip Code	07 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u>Mandeville</u>	LA 70471	Transaction ID: C1320368 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Covington Suites	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUBTOTAL of Receipts This Page (optional	i)	2369.24
TOTAL This Period (last page this line num	ber only)	

			for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 59 (check only one) X 11a				
A 0	ny information copied from such Reports and r for commercial purposes, other than using t	Statements may he name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) American Health Care Association F	olitical Action	Committee					
∠ \.	Full Name (Last, First, Middle Initial) Dixie Taylor-Huff			Date of Receipt				
	Mailing Address 932 East Baddour Pa	arkway		07 19 2011				
	City	State	Zip Code	Transaction ID: C1323711				
	<u>Lebanon</u>	TN	37087-3707	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1875.00				
	Name of Employer Quality Care Health Center	Occupatio Administ	n :rator/Owner					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼		3125.00					
_	Full Name (Last, First, Middle Initial) Harvey Tettlebaum			Date of Receipt				
	Mailing Address 56295 Little Monitea	u Road		0 7 1 3 2 0 1 1				
	City	State	Zip Code	Transaction ID: C1323558				
	California	MO	65018-3069	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		147.34				
	Name of Employer Husch & Eppenberger,LLC	Occupatio lawyer	n					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	221.00					
_	Full Name (Last, First, Middle Initial) Jan Thayer			Date of Receipt				
	Mailing Address 2307 Stagecoach Ro	i.		0 7 2 1 2 0 1 1				
	City	State	Zip Code	Transaction ID: C1326805				
	Grand Island	NE	68801	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1250.00				
	Name of Employer Riverside Lodge Retirement Complex	Occupatio Chair/CE						
	Receipt For:	Aggregate	e Year-to-Date 🔻	_				
	Primary General Other (specify) ▼	0 0	3750.00					
	SUBTOTAL of Receipts This Page (optional)			3272.34				

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16
	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) American Health Care Association P	olitical Action Committee	
Full Name (Last, First, Middle Initial) Michael Torgan Mailing Address 5120 West Goldleaf	Cirolo	Date of Receipt
# 400 City	State Zip Code	07 08 2011
Los Angeles	CA 90056-1297	Transaction ID: C1320369 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Country Villa Health Serv- ices	Occupation Vice President, Customer Services	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Peter Van Runkle		Date of Receipt
Mailing Address 7460 Tottenham PI		07 08 2011
City	State Zip Code	Transaction ID: C1320375
New Albany	OH 43054-9443	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Ohio Health Care Associat-	Occupation Executive Director	
ion Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Jack Vetter		Date of Receipt
Mailing Address 20220 Harney Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C1321351
Elkhorn	NE 68022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Vetter Health Services	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
SUPTOTAL of Possints This Page (entional)		1875.00

SCHEDULE A (FEC Form 3X)

City State Zip Code Bloomington	LE A (FEC Form 3X) RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16				
A. Steven Wannemacher Mailing Address PO Box 3188 City State Zip Code Bloomington IL 61702-3188 FEC ID number of contributing federal political committee. Name of Employer Hertage Enterprises Receipt For: Primary General Occupation President & CE Parkland Falls FEC ID number of contributing federal political committee. Date of Receipt Wannemacher C C C C C C C C C C C C C C C C C C C	oial purposes, other than using the name and COMMITTEE (In Full)	address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
Receipt For:	remacher fress PO Box 3188 State ton IL nber of contributing ical committee. C	61702-3188	M M / D D / Y Y Y Y				
B. Brett Waters Mailing Address 2416 Mesa St. City State Zip Code ID 83401 FEC ID number of contributing federal political committee. Name of Employer New Beginnings Community Living Home Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Andrew S Weisman Mailing Address 7442 Stonegate Blvd. City State Zip Code Parkland FL 33076 FEC ID number of contributing federal political committee. C. Name of Employer Administrator Andrew S Weisman Mailing Address 7442 Stonegate Blvd. City State Zip Code Parkland FL 33076 FEC ID number of contributing federal political committee. Name of Employer NuVision Management Name of Employer NuVision Management Receipt For: Primary General State Sip Code FL 33076 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	riterprises President Aggreement General	ent & CEO ate Year-to-Date ▼ 2500.00					
Idaho Falls	ress 2416 Mesa St.	7in Code	07 / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Living Home Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Primary Other (specify) ▼ Parkland FEC ID number of contributing federal political committee. Name of Employer NuVision Management Receipt For: Aggregate Year-to-Date ▼ Parkland FL 33076 C Date of Receipt Transaction ID: C1326561 Amount of Each Receipt this C 1 Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General	nber of contributing ical committee.	83401	Amount of Each Receipt this Period 250.00				
Andrew S Weisman Mailing Address 7442 Stonegate Blvd. City State Zip Code Parkland FL 33076 FEC ID number of contributing federal political committee. Name of Employer NuVision Management Receipt For: Primary General Date of Receipt Transaction ID: C1326561 Amount of Each Receipt this C 1 Aggregate Year-to-Date ▼	e Admir : Aggre iry General	strator ate Year-to-Date ▼]				
City State Zip Code Transaction ID: C1326561 Parkland FL 33076 Amount of Each Receipt this FEC ID number of contributing federal political committee. Name of Employer NuVision Management C Occupation Vice President Receipt For: Aggregate Year-to-Date ▼	eisman		M M / D D / Y Y Y Y				
FEC ID number of contributing federal political committee. Name of Employer NuVision Management Receipt For: Primary General C Occupation Vice President Aggregate Year-to-Date		•	Transaction ID: C1326561				
NuVision Management Vice President Receipt For: Primary General Vice President Aggregate Year-to-Date F000.00			1250.00				
Primary General 5000 00	lanagamant						
Canal (openin) V	ry General						
SUBTOTAL of Receipts This Page (optional)	of Receipts This Page (optional)		4000.00				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 43 / 59 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Health Care Association Po	litical Action Com	mittee	
Full Name (Last, First, Middle Initial) Alan Zuccari Mailing Address 7712 Carlton Place City	State Z	čip Code	Date of Receipt M M
Mclean FEC ID number of contributing federal political committee.	C	22102	Amount of Each Receipt this Period 1875.00
Name of Employer Hamilton Insurance Agency Receipt For: Primary General Other (specify)	Occupation President Aggregate Year-	to-Date ▼ 3125.00	

SUBTOTAL of Receipts This Page (optional)	<u> </u>	1875.00
TOTAL This Period (last page this line number only)		87152.77

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 59 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Si or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Health Care Association Pol	itical Action Committee	
Full Name (Last, First, Middle Initial) National Health Corporation PAC Mailing Address P.O. Box 1398 City	State Zip Code	Date of Receipt M M M
Murfreesboro FEC ID number of contributing federal political committee. Name of Employer	TN 37130 C C00153445 Occupation	Amount of Each Receipt this Period 5000.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

	THEOULE B (FE	•	Use sepa	rate schedule(s)		NE NUMI only one)	BER:		L	PAGE	45 / 5	9
	EMIZED DISBUR		Detailed S	category of the Summary Page	21b	22 28		23 28b	24 280		25 29	
	y Information copied from s or commercial purposes, o NAME OF COMMITTEE American Health Care	ther than using the	e name and addres	s of any political								
_												
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	City Des Moines		State IA	Zip Code 50309		Am	ount o	f Each	Disburs			eric
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21k	22 28a		b 🗌 :	24 28c	25 29	2 3
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	NAME OF COMMITTEE (In Full) American Health Care Association Political	Il Action Committee								
<u>v</u>	Full Name (Last, First, Middle Initial) JOBS, OPPORTUNITIES AND EDUCATION	DN, PAC (JOE-PAC)			Date	nsaction e of Disbu	ursemen	t	/ * V *	V
	Mailing Address 84-54 Grand Avenue				lo"	7 "	19	2	011	
	City Elmhurst	State Zip Code NY 11373			Amo	ount of Ea	ach Disb			
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	State: District: Full Name (Last, First, Middle Initial) LONGLEAF PINE PAC				Date	nsaction e of Disbu	ursemen	t		
	Mailing Address 703 GREEN VALLEY R	DAD			O ^M 2		19	2	011	Υ
	City Greensboro	State Zip Code NC 27408			Amo	ount of Ea	ach Disb	ursemer	nt this P	erioc
	Purpose of Disbursement Contributions to Federal Candidates				1 -			50	00.00	
	Candidate Name			tegory/ ype						
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	Full Name (Last, First, Middle Initial) PROSPERITY PAC				Date	nsaction e of Disbu	ursemen	t		
	Mailing Address 1006 Pendleton Street				lo ^M	7 ^M /	19	2	011	Y
	City Alexandria	State Zip Code VA 22314			Amo	ount of Ea	ach Disb	ursemer	nt this P	erioc
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	Candidate Name Paul Ryan			tegory/ ype						
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	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		NUMBER: PAGE 47/59
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or	or commercial purposes, other than using the nam	e and addre	ss of any political	committee to so	licit contributions from such committee
\rangle	NAME OF COMMITTEE (In Full) American Health Care Association Political	al Action C	ommittee		
	Full Name (Last, First, Middle Initial) KINZINGER FOR CONGRESS				Transaction ID: D118056 Date of Disbursement
	Mailing Address PO Box 1050				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 2 & 1 \\ 2 & 1 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix} \ \end{bmatrix}$
	City Bourbonnais	State IL	Zip Code 60914		Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates				2500.00
	Candidate Name Rep. Adam Kinzinger			Category/ Type	
	ů K	ement For: Primary Other (spe	2012 General		
	State: IL District: 11				
	Full Name (Last, First, Middle Initial) QUAYLE FOR CONGRESS				Transaction ID: D118050 Date of Disbursement
	Mailing Address 4247 N. 44th Street				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & T \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ Z & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & 1 \end{smallmatrix} \end{bmatrix}$
	City Phoenix	State AZ	Zip Code 85018		Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates				2500.00
	Candidate Name Rep. Ben Quayle			Category/ Type	
	Senate X President	ement For: Primary Other (spe	2012 General ecify)		
	State: AZ District: 03 Full Name (Last, First, Middle Initial)				Transaction ID: D118042
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	Mailing Address 8550 United Plaza Blvd.				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & T \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix} \ \ \\ \begin{bmatrix} Y & Z & O & D & I \\ D & D & D & I \end{bmatrix} \ \ \\ \begin{bmatrix} D & D & D \\ \end{bmatrix} \ \ \ \\ \begin{bmatrix} D & D & D \\ D & D \\ D & D & D \\ D \\ D & D \\ D & D \\ D \\ D & D \\ D & D \\ D \\ D \\ D \\ D & D \\ D \\ D \\ D \\ D & D \\ $
	Mailing Address 8550 United Plaza Blvd. City Baton Rouge	State LA	Zip Code 70809		Amount of Each Disbursement this Period
	City Baton Rouge Purpose of Disbursement Contributions to Federal Candidates				
	City Baton Rouge Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Bill Cassidy			Category/ Type	Amount of Each Disbursement this Period
	City Baton Rouge Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Bill Cassidy Office Sought: X House Senate President		70809 2012 General		Amount of Each Disbursement this Period
	City Baton Rouge Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Bill Cassidy Office Sought: X House Senate X	ement For:	70809 2012 General		Amount of Each Disbursement this Period

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	NAME OF COMMITTEE (In Full) American Health Care Association F				
<u>/</u>	Full Name (Last, First, Middle Initial) BILL CASSIDY FOR CONGRESS				Transaction ID: D118271 Date of Disbursement
	Mailing Address 8550 United Plaza	a Blvd.			$\begin{bmatrix}\begin{smallmatrix}M&7&M\\0&7&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&8\\2&8\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&1\end{smallmatrix}\end{bmatrix}$
	City Baton Rouge	State LA	Zip Code 70809		Amount of Each Disbursement this Period
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	Rep. Bill Cassidy	Disbursement For:	2012	Category/ Type	
	Senate President	X Primary Other (sp	General		
	State: LA District: 06 Full Name (Last, First, Middle Initial) BRIAN BILBRAY FOR CONGRESS	<u> </u>			Transaction ID: D117970 Date of Disbursement
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	Mailing Address 991C Lomas Sant	a Fe Drive			07 19 2011
	Mailing Address 991C Lomas Sant City Solana Beach	ca Fe Drive State CA	Zip Code 92075		
	City Solana Beach Purpose of Disbursement Contributions to Federal Candidates	State			
	City Solana Beach Purpose of Disbursement	State		Category/ Type	Amount of Each Disbursement this Period
	City Solana Beach Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Brian P. Bilbray Office Sought: X House Senate President	State	92075 2012 General		Amount of Each Disbursement this Period
	City Solana Beach Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Brian P. Bilbray Office Sought: X House Senate	State CA Disbursement For: X Primary	92075 2012 General		Amount of Each Disbursement this Period 5000.00 Transaction ID: D118044 Date of Disbursement
	City Solana Beach Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Brian P. Bilbray Office Sought: X House Senate President State: CA District: 50 Full Name (Last, First, Middle Initial)	State CA Disbursement For: X Primary	92075 2012 General		Amount of Each Disbursement this Period 5000.00 Transaction ID: D118044
	City Solana Beach Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Brian P. Bilbray Office Sought: X House Senate President State: CA District: 50 Full Name (Last, First, Middle Initial) GARDNER FOR CONGRESS	State CA Disbursement For: X Primary	92075 2012 General		Amount of Each Disbursement this Period 5000.00 Transaction ID: D118044 Date of Disbursement M 7 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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\rangle	NAME OF COMMITTEE (In Full) American Health Care Association Politi	al Action Committee											
	Full Name (Last, First, Middle Initial) LOEBSACK FOR CONGRESS Mailing Address PO Box 2720					Trans Date	of D	sburs		_		0 1 1	Y
	City Cedar Rapids	State Zip Code IA 52406				Amou	int o	f Each	n Dist	ourse	-	t this F	-
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	Office Sought: X House Senate President State: IA District: 02	sement For: 2012 X Primary General Other (specify)											
-	Full Name (Last, First, Middle Initial) FRIENDS OF DENNIS ROSS					Trans Date	of D	sburs	emer			0 1 1	Y
	Mailing Address PO BOX 7310					0 7	_		2 1	L			
	City LAKELAND	State Zip Code FL 33807				Amou	int o	f Each	n Dist	ourse		t this F	
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	Full Name (Last, First, Middle Initial) DIANE BLACK FOR CONGRESS					Trans Date	of D	sburs	emer				
	Mailing Address PO Box 1437					0 ^M 7	М	D 2	28	/ L	ž	0 1 1	Y
	City Gallatin	State Zip Code TN 37066				Amou	int o	f Each	n Dist	ourse	-	t this F	-
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	Candidate Name Rep. Diane Black			ateg Typ	ory/ e								
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IT.	CHEDULE B (FEC For	52.7	Use sepa	arate schedule(s)	_	NUMBER: PAGE 50 / 59
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	NAME OF COMMITTEE (In Full) American Health Care Assoc					
<u>/</u>	Full Name (Last, First, Middle Initia DIANE BLACK FOR CONGR	,				Transaction ID: D118039 Date of Disbursement
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	City Gallatin		State TN	Zip Code 37066		Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidate Candidate Name	es			Catagony	2500.00
	Rep. Diane Black Office Sought: X House	Disburser	ment For	2012	Category/ Type	
	Senate President		Primary Other (spe	General		
	State: TN District: 06 Full Name (Last, First, Middle Initial PALLONE FOR CONGRESS	•				Transaction ID: D118269 Date of Disbursement
	Mailing Address PO Box 317	76				$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & B \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 1 & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
	City Long Branch		State NJ	Zip Code 07740		Amount of Each Disbursement this Period
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	Contributions to Federal Candidate Candidate Name Rep. Frank Pallone, Jr. Office Sought: X House Senate President	Disburser	ment For: Primary Other (spe	2012 General		
	Contributions to Federal Candidate Candidate Name Rep. Frank Pallone, Jr. Office Sought: X House Senate President State: NJ District: 06 Full Name (Last, First, Middle Initia	Disburser X	Primary	General		Transaction ID: D117644 Date of Disbursement
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	Contributions to Federal Candidate Candidate Name Rep. Frank Pallone, Jr. Office Sought: X House Senate President State: NJ District: 06 Full Name (Last, First, Middle Initial FRIENDS OF GLENN THOM	Disburser X al) IPSON	Primary	General		Date of Disbursement O 7 O 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Contributions to Federal Candidate Candidate Name Rep. Frank Pallone, Jr. Office Sought: X House Senate President State: NJ District: 06 Full Name (Last, First, Middle Initia FRIENDS OF GLENN THOM Mailing Address PO Box 11 City State College Purpose of Disbursement Contributions to Federal Candidate	Disburser X al) IPSON	Primary Other (spe	General ecify) ▼ Zip Code	Type	Date of Disbursement O 7 O 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Contributions to Federal Candidate Candidate Name Rep. Frank Pallone, Jr. Office Sought: X House Senate President State: NJ District: 06 Full Name (Last, First, Middle Initial FRIENDS OF GLENN THOM Mailing Address PO Box 11 City State College Purpose of Disbursement Contributions to Federal Candidate Candidate Name	Disburser X all) IPSON 12 S Disburser	Primary Other (spe	General ecify) ▼ Zip Code 16804 2012 General	Type Category/	Date of Disbursement O 7

SCHEDULE B (FEC Form 3X)

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	Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMM Mailing Address P.O. Box 1444	TTEE, THE				Trans Date	of Di	sburs				0 Ý 1	Y
	City Ennis	State Zip Code TX 75120				Amou	ınt o	f Each	n Disl	ourse	ment	this F	eriod
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	Candidate Name Rep. Joe L. Barton		C	ate Ty	gory/ oe								
	2 22	sement For: 2012 X Primary General Other (specify)											
	Full Name (Last, First, Middle Initial)					Trans		-	_		57		
	JOE WALSH FOR CONGRESS COMMI	ITEE, INC.				Date M		sburs	eme	nt /		· v ·	V
	Mailing Address P.O. BOX 56 830 W.	ROUTE 22				o ^M 7	М		2 1	/ L	ž	0 Ì 1	Y
	City LAKE ZURICH	State Zip Code IL 60047				Amou	ınt o	f Each	n Disl	ourse	ment	this F	Perioc
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	Candidate Name Rep. Joe Walsh		C	ate Ty	gory/ be								
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	Full Name (Last, First, Middle Initial) VOLUNTEERS FOR SHIMKUS					Trans Date	of Di	sburs	eme				
	Mailing Address P.O. BOX 661					0 ^M 7	М	/ D 2	2 8 2 8	/ L	ž	0 1 1	Y
	City COLLINSVILLE	State Zip Code IL 62234				Amou	ınt o	f Each	n Disl	ourse	ment	this F	Period
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	Candidate Name Rep. John Shimkus			ate Ty	gory/ oe								
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American Health Care Association Po	itical Action Committee		
Full Name (Last, First, Middle Initial) LYNN JENKINS FOR CONGRESS			Transaction ID: D118058 Date of Disbursement
Mailing Address P.O. Box 1441			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Topeka	State Zip Code KS 66601		Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates			2500.00
Candidate Name Rep. Lynn Jenkins		Category/ Type	
Senate President	bursement For: 2012 X Primary General Other (specify)		
State: KS District: 02 Full Name (Last, First, Middle Initial)			Turner allen ID - D440007
MICHAUD FOR CONGRESS			Transaction ID: D118267 Date of Disbursement
Mailing Address 213 Lisbon St			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{bmatrix}$
City Lewiston	State Zip Code ME 04240		Amount of Each Disbursement this Period
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Candidate Name Rep. Michael H. Michaud		Category/ Type	
Office Sought: X House Senate President State: ME District: 02	oursement For: 2012 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) MIKE ROSS FOR CONGRESS COMI	MITTEE		Transaction ID: D117969 Date of Disbursement
Mailing Address PO Box 360			07 19 7 2011
City Prescott	State Zip Code AR 71857		Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates			5000.00
Candidate Name Rep. Mike Ross		Category/ Type	
Senate President	oursement For: 2012 X Primary General Other (specify) ▼		
State: AR District: 04			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN					P	AGE	53 /	59
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NAME OF COMMITTEE (In Full) American Health Care Association Political	Action Committee										
Full Name (Last, First, Middle Initial) FRIENDS OF NAN HAYWORTH				Da		Disburs				2 0 1 -	Y
Mailing Address 51 Gleneida Avenue					1		_	<u> </u>		201	
,	State Zip Code NY 10512			An	nount	of Eacl	h [Disburs	emer	nt this	Period
Purpose of Disbursement Contributions to Federal Candidates									25	00.00)
Candidate Name Rep. Nan Hayworth			egory/ ype								
X	ment For: 2012 Primary General Other (specify)										
Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS				Da	ate of	ction ID	ser			/ * V *	V
Mailing Address P. O. Box 1919					7 ^M		1 9	9 /	` 2	2 0 1 ·	1 '
,	State Zip Code WI 53547			An	nount	of Eacl	h [Disburs	emer	nt this I	Period
Purpose of Disbursement Contributions to Federal Candidates									50	00.00)
Candidate Name Rep. Paul D. Ryan			tegory/ ype								
	ment For: 2012 Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				Tra	ansac	tion ID):	D118	051		
OLSON FOR CONGRESS COMMITTEE				Da		Disburs	ser	nent		/ · Y ·	Y
Mailing Address PO Box 16381					7		2	1	2	0 1 ·	1
	State Zip Code TX 77496			An	nount	of Eacl	hΓ	Disburs	emer	nt this I	Period
Purpose of Disbursement Contributions to Federal Candidates									25	00.00)
Candidate Name Rep. Pete Olson			egory/ ype								
	ment For: 2012 Primary General Other (specify)										
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SUBTOTAL of Disbursements This Page (optional) .			•						100	00.00	

TOTAL This Period (last page this line number only)

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/ American Health Care Association Poli	tical Action Co	ommittee			
Full Name (Last, First, Middle Initial) BERG FOR CONGRESS Mailing Address PO BOX 9394					Transaction ID: D118038 Date of Disbursement 077
City FARGO	State ND	Zip Code 58106			Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates				` '	2500.00
Candidate Name Rep. Rick Berg				tegory/ ype	
Senate President	ursement For: X Primary Other (spe	2012 General		··	
State: ND District: 00 Full Name (Last, First, Middle Initial)					Transaction ID: D118036
SANDY ADAMS FOR CONGRESS					Date of Disbursement
Mailing Address P. O. Box 1566					07 21 7 2011
City Orlando	State FL	Zip Code 32802			Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates					2500.00
Candidate Name Rep. Sandy Adams				tegory/ Type	
Office Sought: X House Senate President State: FL District: 24	ursement For: X Primary Other (spe	2012 General		71-	
Full Name (Last, First, Middle Initial) STIVERS FOR CONGRESS					Transaction ID: D118045 Date of Disbursement
Mailing Address 4679 Winterset Drive					077 / 21 / 2011
City Columbus	State OH	Zip Code 43220			Amount of Each Disbursement this Period
D				` `]	2500.00
Purpose of Disbursement Contributions to Federal Candidates			C0	tegory/	
Contributions to Federal Candidates Candidate Name Rep. Steve Stivers Office Sought: X House Senate President	ursement For: X Primary Other (spe	2012 General ecify)		уре	
Contributions to Federal Candidates Candidate Name Rep. Steve Stivers Office Sought: X House Disb Senate	X Primary	General			

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	EMIZED DISBURSEMENTS	for each category of th Detailed Summary Pag	e	21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports and State for commercial purposes, other than using the na				
\rangle	NAME OF COMMITTEE (In Full) American Health Care Association Politic	al Action Committee			
	Full Name (Last, First, Middle Initial) TIM GRIFFIN FOR CONGRESS CAMPA	IGN COMMITTEE			Transaction ID: D118054 Date of Disbursement
	Mailing Address P.O. Box 7526				$\begin{bmatrix} 0 & 7 & M & / & D & 2 & 1 \\ 0 & 7 & M & / & D & 2 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Y & 2 & 0 & 1 & 1 \end{bmatrix}$
	City Little Rock	State Zip Code AR 72217			Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates			0 0	2500.00
	Candidate Name Rep. Tim Griffin			ategory/ Type	
	Senate President	sement For: 2012 X Primary Gener Other (specify)	al		
	State: AR District: 02 Full Name (Last, First, Middle Initial) COLE FOR CONGRESS				Transaction ID: D118043 Date of Disbursement
	Mailing Address P.O. Box 722256				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Norman	State Zip Code OK 73070			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contributions to Federal Candidates				2500.00
	Candidate Name Rep. Tom Cole			ategory/ Type	
	9 20	sement For: 2012 X Primary Gener Other (specify)	al		
	Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS				Transaction ID: D118052 Date of Disbursement
	Mailing Address PO Box 701				$\begin{bmatrix} 0.7 & M & / & D & D & / & 2.1 & / & 2.0 & 1.1 \end{bmatrix}$
	City Gainesville	State Zip Code GA 30503			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contributions to Federal Candidates				2500.00
	Candidate Name Rep. Tom Graves			ategory/ Type	
	Office Sought: X House Disbur	sement For: 2012	 al		
	Senate President State: GA District: 09	X Primary Gener Other (specify) ▼	ai		

SCHEDULE B (FEC Form 3X)

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American Health Care Association Politi	cal Action C	Committee										
Full Name (Last, First, Middle Initial)						Trans	acti	ion ID:	D11	8265		
LATHAM FOR CONGRESS						Date	of D	isburse	ement			
Mailing Address P.O. Box 71						0 ^M 7	М	[/] 2	8	Y	2 0 1 1	Y
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State: IA District: 04		'J/ ▼										
Full Name (Last, First, Middle Initial) LATHAM FOR CONGRESS								ion ID:	D11 ement	8266		
Mailing Address P.O. Box 71						o ^M 7	М	[/] 2	8 /	Y	2 0 1 1	Y
City Clarion	State IA	Zip Code 50525				Amou	nt o	f Each	Disbur	semei	nt this F	erio
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Office Sought: X House Senate President State: IA District: 04	rsement For: Primary Other (spe	2012 X General ecify) ▼										
Full Name (Last, First, Middle Initial) TOM REED FOR CONGRESS								ion ID:	D11 ement	8049		
Mailing Address 99 W 1st Street						0 ^M 7	М	[/] 2	1 /	Y	0 1 1	Y
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Candidate Name Rep. Tom Reed				ate Ty	gory/ pe							
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NAME OF COMMITTEE (In Full)			
American Health Care Association Politica	Action Committee		
Full Name (Last, First, Middle Initial) TREY GOWDY FOR CONGRESS			Transaction ID: D118048 Date of Disbursement
Mailing Address PO BOX 3324			0 7 M / 2 1 / Y Y Y Y Y Y
,	State Zip Code SC 29304		Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates			2500.00
Candidate Name Rep. Trey Gowdy		Category/ Type	
Senate X President	ment For: 2012 Primary General Other (specify)		
State: SC District: 04			
Full Name (Last, First, Middle Initial) VERN BUCHANAN FOR CONGRESS			Transaction ID: D118041 Date of Disbursement
Mailing Address P. O. Box 48928			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} 7^{M} \\ \end{bmatrix}^{D} \begin{bmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} 2 \end{bmatrix}^{D} \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} 0 \end{smallmatrix} 1 1^{Y} \\ \end{bmatrix}$
,	State Zip Code FL 34230		Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates			2500.00
Candidate Name Rep. Vern Buchanan		Category/ Type	
· —	ment For: 2012 Primary General Other (specify)		
State: FL District: 13			
Full Name (Last, First, Middle Initial) GOAL PAC			Transaction ID: D118273 Date of Disbursement
Mailing Address PO Box 30344			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & B \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
	State Zip Code MD 20824-0344		Amount of Each Disbursement this Period
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Candidate Name Sander Levin		Category/ Type	
Senate President	ment For: Primary General Other (specify) ▼		
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Mailing Address P.O. BOX 4945				0 ^M 7	M /	^D 2	8 /	ž	0 1 1	Y		
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χ Senate President	X Primary Other (spe	General										
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Full Name (Last, First, Middle Initial)						Trans	actio	n ID:	D118	268		
PAT ROBERTS FOR US SENATE INC						Date of	of Dis	burse	ment			
Mailing Address PO BOX 433						0 ^M 7	M /	^D 2	8 /	ž Ž	0 1 1	Y
City	State	Zip Code				Amou	nt of	Each	Disburse	ement	this P	eriod
GREAT BEND	KS	67530								250	00.00	
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	X Primary	General										
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\rangle	NAME OF COMMITTEE (In Full) American Health Care Association Politic			
	Full Name (Last, First, Middle Initial) To Organize a Majority PAC Mailing Address PO BOX 752			Transaction ID: D117646 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City DES MOINES Purpose of Disbursement Contributions to Federal Committees Candidate Name	State Zip Code IA 50303	Category/ Type	Amount of Each Disbursement this Period 5000.00
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